

# Sample electronically completed AD-1161

1. To be completed by NRCS; check appropriate box.

☐ This transaction is for CCC

☒ This transaction is for NRCS

OMB No. 0578-0018

U. S. DEPARTMENT OF AGRICULTURE		2. STATE Oklahoma		3. PROGRAM NAME	
<b>APPLICATION FOR PAYMENT</b>		EASEMENT or CONTRACT NO. 72-7335-X-XXXX		Enter only the numerical value of the extent completed in column G., Extent. Space will not allow the extent and practice units completed in one cell.	
Enter the practice code number and component code number in column C., Practice and Identifiable Unit		PRACTICE CODE NO. 40103			

8. SPECIFIED CONSERVATION PRACTICES PERFORMED										
Line	A. Agreement or Contract Item No.	B. Field	C. Practice and Identifiable Unit	D. Date Started	E. Date Completed	F. Practice Units Completed	G. Extent	H. Average Cost \$	I. Cost Share %	J. Amount Earned \$
1	1a	1	(550) (GMFL)	03-03-2003	03-03-2003	#PLS	150	\$10.00	75.00	\$1,125.00
2	1b	1	(550) (GD1)	03-03-2003	03-03-2003	AC	30			
3	2a	2	(410) (EM)	04-04-2003	05-05-2003	CY	4723			
4	2b	2	(410) (BR12)	04-04-2003	05-05-2003	DIFT	1200			
5	2c	2	(410) (TG)	04-04-2003	05-05-2003	BACH	1	\$220.00	75.00	\$165.00

9. OTHER PROGRAM PAYMENTS (APPRAISAL, SURVEY, EASEMENT PAYMENT, ETC.)										
1	3a	2	(342) (GBGS)	05-05-2003	05-05-2003	AC	1.2	\$90.00	75.00	\$81.00
2	4	2	(590) (FTCA)	05-05-2003	05-05-2003	AC	1.2	\$40.00		
3	5a	3	(378) (EM)	04-04-2003	05-05-2003	CY	12,377	\$1.00		
4	5b	3	(378) (BR12)	04-04-2003	05-05-2003	DIFT	4800	\$1.00		
5	5c	3	(378) (TG)	04-04-2003	05-05-2003	BACH	1	\$220.00	75.00	\$0.00
<b>10. TOTAL EARNED:</b>										\$22,410.38

11. DIVISION OF PAYMENT BETWEEN PARTICIPANTS										
		PARTICIPANT 1				PARTICIPANT 2				
A. Did the State or Federal Government bear any part of this expense?		NO <input checked="" type="checkbox"/>	B. How much? _____			H. NO <input type="checkbox"/>		I. How much? _____		
		YES <input type="checkbox"/>				YES <input type="checkbox"/>				
		LINE (1)	% SHARE (2)	PAYMENT SHARE (3)			LINE (1)	% SHARE (2)	PAYMENT SHARE (3)	
<div>The word "All" should be input in Block 11., line G., column (1) to signify that the practices listed on all lines are referenced</div>										
						J.				
						K.				
						L.				
						M.				
E. State and Federal aid										
F. Other										
G. Net payment due participant		All	100.00	\$22,410.38			N.			